

| <b>SCC eFile</b>  | <b>2013 ANNUAL REPORT</b><br><b>COMMONWEALTH OF VIRGINIA</b><br><b>STATE CORPORATION COMMISSION</b> | <b>213549174</b> |   |                                     |         |                                     |          |           |
|---|---|------------------|---|-------------------------------------|---------|-------------------------------------|----------|-----------|
| <div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <p>1.) CORPORATION NAME:<br/> <b>The Children's Place Retail Stores, Inc.</b></p> <p>2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:<br/> <b>CORPORATION SERVICE COMPANY</b><br/> <b>Bank of America Center, 16th Floor</b><br/> <b>1111 East Main Street</b></p> <p><b>RICHMOND, VA</b></p> <p>3.) CITY OR COUNTY OF VA REGISTERED OFFICE:<br/> <b>RICHMOND CITY</b></p> <p>4.) STATE OR COUNTRY OF INCORPORATION:<br/> <b>DE</b></p> </div> <div style="width: 35%;"> <p>DUE DATE: <b>10/31/2013</b></p> <p>SCC ID NO: <b>F0583429</b></p> <p>5.) STOCK INFORMATION</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="text-align: left;">CLASS</th> <th style="text-align: left;">AUTHORIZED</th> </tr> <tr> <td>COMMON</td> <td>100,000,000</td> </tr> <tr> <td>PREFER</td> <td>1,000,000</td> </tr> </table> </div> </div> |   |                  | CLASS   | AUTHORIZED                          | COMMON  | 100,000,000                         | PREFER   | 1,000,000 |
| CLASS   | AUTHORIZED  |                  |   |                                     |         |                                     |          |           |
| COMMON  | 100,000,000   |                  |   |                                     |         |                                     |          |           |
| PREFER  | 1,000,000   |                  |   |                                     |         |                                     |          |           |
| <p>6.) PRINCIPAL OFFICE ADDRESS:</p> <p style="margin-left: 40px;">ADDRESS: 500 PLAZA DR<br/>4TH FL/ACCOUNTING</p> <p style="margin-left: 40px;">CITY/ST/ZIP: SECAUCUS, NJ 07094</p>  |   |                  |   |                                     |         |                                     |          |           |
| <p>7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.</p>  |   |                  |   |                                     |         |                                     |          |           |
| <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; vertical-align: top;"> NAME: BERNARD MCCrackEN<br/> TITLE: VP CONTROLLER<br/> ADDRESS: 500 PLAZA DRIVE<br/> CITY/ST/ZIP/CO: SECAUCUS, NJ 07094 </td> <td style="width: 10%; text-align: center; vertical-align: middle;"> <input checked="" type="checkbox"/> </td> <td style="width: 20%; text-align: center; vertical-align: middle;">OFFICER</td> <td style="width: 10%; text-align: center; vertical-align: middle;"> <input type="checkbox"/> </td> <td style="width: 10%; text-align: center; vertical-align: middle;">DIRECTOR</td> </tr> </table>   |   |                  | NAME: BERNARD MCCrackEN<br>TITLE: VP CONTROLLER<br>ADDRESS: 500 PLAZA DRIVE<br>CITY/ST/ZIP/CO: SECAUCUS, NJ 07094 | <input checked="" type="checkbox"/> | OFFICER | <input type="checkbox"/>            | DIRECTOR |           |
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| NAME: JANE T. ELFERS<br>TITLE: PRESIDENT<br>ADDRESS: 500 PLAZA DRIVE<br>CITY/ST/ZIP/CO: SECAUCUS, NJ 07094  | <input checked="" type="checkbox"/>   | OFFICER          | <input type="checkbox"/>  | DIRECTOR                            |         |                                     |          |           |
| <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; vertical-align: top;"> NAME: BRADLEY COST<br/> TITLE: SECRETARY<br/> ADDRESS: 500 PLAZA DRIVE<br/> CITY/ST/ZIP/CO: SECAUCUS, NJ 07094 </td> <td style="width: 10%; text-align: center; vertical-align: middle;"> <input checked="" type="checkbox"/> </td> <td style="width: 20%; text-align: center; vertical-align: middle;">OFFICER</td> <td style="width: 10%; text-align: center; vertical-align: middle;"> <input type="checkbox"/> </td> <td style="width: 10%; text-align: center; vertical-align: middle;">DIRECTOR</td> </tr> </table>  |   |                  | NAME: BRADLEY COST<br>TITLE: SECRETARY<br>ADDRESS: 500 PLAZA DRIVE<br>CITY/ST/ZIP/CO: SECAUCUS, NJ 07094          | <input checked="" type="checkbox"/> | OFFICER | <input type="checkbox"/>            | DIRECTOR |           |
| NAME: BRADLEY COST<br>TITLE: SECRETARY<br>ADDRESS: 500 PLAZA DRIVE<br>CITY/ST/ZIP/CO: SECAUCUS, NJ 07094  | <input checked="" type="checkbox"/>   | OFFICER          | <input type="checkbox"/>  | DIRECTOR                            |         |                                     |          |           |

|  |  |   |  |
|--|--|---|--|
| NAME:<br>TITLE:<br>ADDRESS:<br>CITY/ST/ZIP/CO:   | JEFFREY WOOD<br>TREASURER<br>500 PLAZA DRIVE<br>SECAUCUS, NJ 07094     | <input checked="" type="checkbox"/> OFFICER | <input type="checkbox"/> DIRECTOR            |
| NAME:<br>TITLE:<br>ADDRESS:<br>CITY/ST/ZIP/CO:   | JANE T. ELFERS<br>DIRECTOR<br>500 PLAZA DRIVE<br>SECAUCUS, NJ 07094    | <input type="checkbox"/> OFFICER            | <input checked="" type="checkbox"/> DIRECTOR |
| NAME:<br>TITLE:<br>ADDRESS:<br>CITY/ST/ZIP/CO:   | SUSAN P. GRIFFITH<br>DIRECTOR<br>500 PLAZA DRIVE<br>SECAUCUS, NJ 07094 | <input type="checkbox"/> OFFICER            | <input checked="" type="checkbox"/> DIRECTOR |
| NAME:<br>TITLE:<br>ADDRESS:<br>CITY/ST/ZIP/CO:   | NORMAN MATTHEWS<br>DIRECTOR<br>500 PLAZA DRIVE<br>SECAUCUS, NJ 07094   | <input type="checkbox"/> OFFICER            | <input checked="" type="checkbox"/> DIRECTOR |
| NAME:<br>TITLE:<br>ADDRESS:<br>CITY/ST/ZIP/CO:   | JOSEPH GROMEK<br>DIRECTOR<br>500 PLAZA DRIVE<br>SECAUCUS, NJ 07094     | <input type="checkbox"/> OFFICER            | <input checked="" type="checkbox"/> DIRECTOR |
| NAME:<br>TITLE:<br>ADDRESS:<br>CITY/ST/ZIP/CO:   | LOUIS LIPSCHITZ<br>DIRECTOR<br>500 PLAZA DRIVE<br>SECAUCUS, NJ 07094   | <input type="checkbox"/> OFFICER            | <input checked="" type="checkbox"/> DIRECTOR |
| NAME:<br>TITLE:<br>ADDRESS:<br>CITY/ST/ZIP/CO:   | JOSEPH ALUTTO<br>DIRECTOR<br>500 PLAZA DRIVE<br>SECAUCUS, NJ 07094     | <input type="checkbox"/> OFFICER            | <input checked="" type="checkbox"/> DIRECTOR |
| I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.  |  |   |  |
| /s/ JEFFREY WOOD   |  | JEFFREY WOOD, TREASURER                     |  |
| SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT  |  | DATE  |  |
| It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing. |  |   |  |